

# EMPLOYER'S RETURN OF TAX WITHHELD

(FORM W-1)

MAKE CHECK OR MONEY ORDER TO:

## CITY OF BEDFORD TAX DEPARTMENT

P.O. BOX 92636-T  
CLEVELAND, OHIO 44190-2636  
(888) 232-1600 or (440) 735-6505  
www.bedfordoh.gov

FEDERAL I.D./SSN

1. Payroll subject to Bedford Tax: **NOTE:** 401k – deferred compensation annuity payments of any kind ARE taxable \$ .....
2. Bedford Tax due at 2.25% \$ .....
3. Adjustments to tax: (attach statement) \$ .....
4. Penalty/Interest: Penalty = 15% per mo., Interest = 1 1/2% per mo. \$ .....
5. TOTAL DUE WITH THIS FORM: \$ .....

TAX YEAR: \_\_\_\_\_ PAYMENT ENCLOSED FOR:

- ☐ JAN FEB MAR ..... DUE 4/30  
☐ APR MAY JUNE ..... DUE 7/31  
☐ JUL AUG SEPT ..... DUE 10/31  
☐ OCT NOV DEC ..... DUE 1/31  
☐ MONTH OF \_\_\_\_\_

MONTHLY REPORTS DUE BY 20TH OF FOLLOWING MONTH

PHONE (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(SIGNED) \_\_\_\_\_

OFFICIAL  
TITLE \_\_\_\_\_

I HEREBY CERTIFY THAT THE INFORMATION AND  
STATEMENTS CONTAINED HEREIN ARE TRUE AND CORRECT

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS ABOVE

**ORIGINAL – RETURN THIS COPY WITH PAYMENT**

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**DUPLICATE – RETAIN FOR YOUR RECORDS**